

AUTO CR - LOG SUMMARY #1075918

TYPE: INFO

Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
It is reported that [REDACTED] resisted arrest by threatening officers with a knife and refused to put it down when ordered; Officer Page discharged his TASER striking [REDACTED] and assisting in taking him into custody.	(None Entered)		

REFERENCE: Log #1075896

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	HAWKINS, TIMOTHY M	1454	[REDACTED]	011 /	SERGEANT OF POLICE	M	WHI		

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
30-JUN-2015 02:51 - 30-JUN-2015 02:51	[REDACTED]	1131	011	290 - RESIDENCE	

Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation

Other Involved Parties

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
NON-CPD	Victim/Subject	[REDACTED]					M	BLK	[REDACTED]	
CPD Employee	Involved Member	PAGE, RICKY L	11349	[REDACTED]	011 /	POLICE OFFICER	M	BLK	[REDACTED]	

Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship

Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		
Notification Comments:			

Incident Category List

Incident Category	Primary?	Initial?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y	Y

Investigator History

Investigator History

Investigator	Type	Assigned Team		Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
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Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
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Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	26-AUG-2015 05:21	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	No allegations of misconduct.
CLOSED AT C.O.P.A.	26-AUG-2015 05:21	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	
PENDING ASSIGN TEAM	08-JUL-2015 11:46	QUERFURTH, PATRICK	SUPERVISING INV COPA	113 /	
PENDING SUPERVISOR REVIEW	08-JUL-2015 10:11	HILL, CHANTELLE	INVESTIGATOR I COPA	113 /	
PRELIMINARY	08-JUL-2015 10:11	HILL, CHANTELLE	INVESTIGATOR I COPA	113 /	
PRELIMINARY	30-JUN-2015 11:29	GOLDSTON, MICHAEL	INVESTIGATOR 3 COPA	113 /	- download -
PENDING SUPERVISOR REVIEW	30-JUN-2015 11:28	GOLDSTON, MICHAEL	INVESTIGATOR 3 COPA	113 /	
PRELIMINARY	30-JUN-2015 07:37	GOLDSTON, MICHAEL	INVESTIGATOR 3 COPA	113 /	

Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					GOLDSTON, MICHAEL	30-JUN-2015 07:37			
	DOCUMENTS - INTAKE INCIDENT		2	Officer Ricky Page #11349.	N	GOLDSTON, MICHAEL	30-JUN-2015 11:22	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		4	[REDACTED]	N	GOLDSTON, MICHAEL	30-JUN-2015 11:21	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		2	PO Page	N	HILL, CHANTELLE	08-JUL-2015 10:10	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		5	[REDACTED]	N	GOLDSTON, MICHAEL	30-JUN-2015 11:20	APPROVED		
	RELATED - INCIDENT LOG NO.					STOUTENBOROUGH, ANDREA	26-AUG-2015 05:24			
	DOCUMENTS - INTAKE INCIDENT		1		N	HILL, CHANTELLE	08-JUL-2015 10:09	APPROVED		
	DOCUMENTS - INTAKE INCIDENT		1		N	HILL, CHANTELLE	08-JUL-2015 10:11	APPROVED		

Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Review Accused

Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
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Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
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FACE SHEET (Notification Date: 30-JUN-2015) - LOG #1075918

TYPE: INFO

Reporting Party Information

	Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
CPD Employee	Reporting Party Third Party	HAWKINS, TIMOTHY M	1454	[REDACTED]	011 /	SERGEANT OF POLICE	M	WHI		

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Incident Details

CR Required?		Manner Incident Received?	PAX
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IPRA	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

Initial Incident Category List

Initial Incident Category	Primary?
20C - GROUP 20 - NOTIFICATIONS TASER DISCHARGE	Y

Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IPRA	CIVILIAN OFFICE OF POLICE ACCOUNTABILITY	-	30-JUN-2015 07:37	GOLDSTON, MICHAEL	

Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
ADMINISTRATIVELY CLOSED	26-AUG-2015 05:21	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	No allegations of misconduct.
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PRELIMINARY	30-JUN-2015 07:37	GOLDSTON, MICHAEL	INVESTIGATOR 3 COPA	113 /	

CHICAGO POLICE DEPARTMENT

ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11. 420C (REV. 6/30)

INSTANT UPDATE UNIT COMPLETE

CB #:

IR #:

YD #:

RD #:

EVENT #:

ARREST REPORTING						
OFFENDER	Name: [REDACTED]	Male	[REDACTED]			
	Res: [REDACTED]	Black				
	Unknown	5' 11"				
	DOB: [REDACTED]	240 lbs				
	AGE: 49 years	Brown Eyes				
	POB: Illinois	Black Hair				
DLN: [REDACTED]	Short Hair Style					
ARMED WITH Lethal Cutting Instrument						
INCIDENT	Arrest Date: 30 June 2015 02:53	TRR Completed? Yes	Total No Arrested: 1	Co-Arrests	Assoc Cases	
	Location: [REDACTED]	Beat: 1131	Dependent Children? No	DCFS Ward ?	No	
	290 - Residence					
	Holding Facility: District 011 Male Lockup					
CHARGES	Resisted Arrest? Yes					
	1	Offense As Cited	720 ILCS 5.0/9-1-A-1 MURDER - FIRST DEGREE Class M - Type F	Victim	Domestic Related [REDACTED]	
	2	Offense As Cited	720 ILCS 5.0/12-2-B-4 AGG ASSAULT/PEACE OFFICER/WEAPON Class 4 - Type F		State Of Illinois, P.O. Page	
RECOVERED NARCOTICS	NO NARCOTICS RECOVERED					
WARRANT	NO WARRANT IDENTIFIED					

ARREST REPORTING

VICTIM

Name: [REDACTED]	Beat: 1131	Female Black DOB: [REDACTED] Age: 49 years	Injured? Yes Deceased? Yes Hospitalized? No Treated and Released? No Comments: [REDACTED]
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NON-OFFENDER(S)

Name: STATE OF ILLINOIS, P.O. Page Res: 3151 W Harrison St Chicago, IL 60612 312-746-8386	Beat: 1134	Male DOB: [REDACTED] Age: [REDACTED]	Injured? No Deceased? No Hospitalized? No Treated and Released? No Comments: [REDACTED]
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COMPLAINANT

Name: [REDACTED]	Beat: 731	Male Black DOB: [REDACTED] Age: 28 years	Injured? No Deceased? No Hospitalized? No Treated and Released? No Comments: [REDACTED]
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ARRESTEE VEHICLE

NO ARRESTEE VEHICLE INFORMATION ENTERED

PROPERTIES

Confiscated Properties :

All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.

PROPERTIES INFORMATION FOR [REDACTED]

NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.

ARREST REPORTING

(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)

event [REDACTED]

in summary, a/os responded to a call of check the well being. upon arriving, a/os met with complainant [REDACTED] who related that he had seen a facebook post by arrestee stating that arrestee had killed victim [REDACTED]. arrestee is the boyfriend of victim. complainant further related that he had tried calling victim several times on her cell phone and she was not answering. complainant also stated that he could hear arrestee inside arrestee and victim's apartment making noise and throwing things around. at this time, arrestee was observed by a/os leaning out of his third floor apartment window and yelling that officers should kill him, he was dead already and that he had taken poison three times already. when a/os asked arrestee through the window where victim was, arrestee responded "she is with tommy, she isn't here." arrestee then stated "i'm not coming down, you're going to have to break in and kill me." at this time, a/os approached the third floor apartment rear door, knocked and announced office and directed arrestee to open the door. arrestee responded with "you're going to have to break in and kill me." rear door was previously broken and leaning on frame. at this time, 1120r sgt.hawkins made entry followed by po paige and a/os. at this time, hawkins observed arrestee with a knife in hand. a/os directed arrestee to drop the knife multiple times. arrestee repeatedly stated "you're gonna have to kill me." arrestee then turned towards p.o. paige and took an aggressive posture. p.o. page deployed taser to apprehend arrestee. arrestee fell in apartment bathroom with knife still in hand. at this time, a/o miesczak disarmed arrestee and dropped the knife into the bath tub, then proceeded to handcuff arrestee. at this time, 1111r ofc conlisk discovered victim lying prone in apartment bedroom, unresponsive. 1111r then observed a computer cord wrapped around victim's neck. 1111r called for ems. amb 23 arrived on scene at 0257. victim pronounced on scene by [REDACTED] arrestee taken into custody and transported to [REDACTED] by beat 1172r. arrestee treated and released by [REDACTED] arrestee then transported to 011 by 1172r for processing. name check clear, not in gipp, trap or ssl. extended taser probe inventoried under # [REDACTED]

m/e hines #69 notified at 0408 (2015-02731), news affairs p.o. alfaro #19618 notified at 0355, crime lab sarlo #13131 notified at 0402, dss odonnell #2167 notified at 0413, area north detective spain #21403 notified at 0310, cpic chibe #7303 notified at 0424

INCIDENT NARRATIVE

COURT INFO

Desired Court Date:

Branch:

Court Sgt Handle? No

BOND INFO

H BOND INFORMATION NOT AVAILABLE

REPORTING PERSONNEL

ATTESTING OFFICER:

I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.

Attesting Officer: #17622 FLORES, E [REDACTED] 30 JUN 2015 07:29

ARRESTING OFFICER(S):

1st Arresting Officer: #15757 MIESZCAK, D J [REDACTED] Beat 1133R

2nd Arresting Officer: #17622 FLORES, E [REDACTED] 1133R

APPROVING SUPERVISOR:

Approval of Probable Cause : #1434 LASCH, A P [REDACTED] 30 JUN 2015 07:38

ARREST PROCESSING REPORT

LOCKUP KEEPER PROCESSING

INTERVIEW LOG

VISITOR LOG

Holding Facility: District 011 Male Lockup
 Received in Lockup: 30 June 2015 07:57
 Prints Taken: 30 June 2015 07:57
 Palmprints Taken: Yes
 Photograph Taken: 30 June 2015 08:02
 Released from Lockup:

Time Last Fed:
 Time Called: Phone#:
 Cell #: A
 Transport Details : 2PO 1172R 30-JUN-2015 03:28

VISUAL CHECK OF ARRESTEE

Is there obvious pain or injury? No
 Is there obvious signs of infection? No
 Under the influence of alcohol/drugs? No
 Signs of alcohol/drug withdrawal? No
 Appears to be despondent? No
 Appears to be irrational? No
 Carrying medication? No

ARRESTEE QUESTIONNARIE

Presently taking medication? No
 (if female)are you pregnant? No
 First time ever been arrested? No
 Attempted suicide/serious harm? No
 Serious medical or mental problems? No
 Are you receiving treatment? No
 Transgender/intersex/gender non-conforming? No
 Deaf/hard of hearing-request interpreter for court? No
 Interpreter needed? (indicate language) No

RETURN TO HOLDING FACILITY COMMENTS:

QUESTIONNAIRE REMARKS:

Printed And Returned To Det

LOCKUP KEEPER COMMENTS:

30 JUN 2015 08:43 SLATER, Frank K [REDACTED] : Place In Cell# A
 30 JUN 2015 08:44 SLATER, Frank K [REDACTED] : Place In Cell# A

EMERGENCY CONTACT

Name : REFUSED

Res: Beat:

NO INTERVIEWS LOGGED

NO VISITORS LOGGED

ARREST PROCESSING REPORT

MOVEMENT LOG	Action	By	Destination	Reason
	PERMANENT MOV		30 JUN 2015 05:18	District 011 Male Lockup
	RELEASED BY	#1434 Lasch, Alan P ([REDACTED]	30 JUN 2015 07:42	District 011 Male Lockup
	RECEIVED BY	#20592 Regal, Mark A [REDACTED]	30 JUN 2015 07:42	Area 4
	RECEIVED BY	#5666 Menoni, Joseph A [REDACTED]	30 JUN 2015 07:56	District 011 Male Lockup
	RECEIVED BY	#1434 Lasch, Alan P [REDACTED]	30 JUN 2015 08:11	Central Male Lockup
				Permanent Move Record

WC COMMENTS	Watch Commander Comments:	REL w/o CHARGING
		DOES NOT APPLY TO THIS ARREST

PROCESSING PERSONNEL	ARRESTEE PROCESSING PERSONNEL:	Beat
Searched By:	#5666 MENONI, J A [REDACTED]	
Lockup Keeper:	#17565 PHILBIN, T P [REDACTED]	
Assisting Arresting Officer:	#11349 PAGE, R L ([REDACTED]	1106E
Assisting Arresting Officer:	#1454 HAWKINS, T M ([REDACTED]	1120R
Assisting Arresting Officer:	#16730 MEEKS, D D ([REDACTED]	1132R
Assisting Arresting Officer:	#16816 BLANCO, A J [REDACTED]	1111R
Assisting Arresting Officer:	#2795 CLARK, R J [REDACTED]	1132R
Assisting Arresting Officer:	#4308 JAMES, E T [REDACTED]	1106E
Assisting Arresting Officer:	#8092 CONLISK, B J ([REDACTED]	1111R
Fingerprinted By:	BARRY, C [REDACTED]	
APPROVAL PERSONNEL:		

CHICAGO POLICE DEPARTMENT
ORIGINAL CASE INCIDENT REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653
(For use by Chicago Police Department Personnel Only)
CPD-11-388(6/03)-C

RD #:

EVENT #:

Case ID:

INCIDENT

ASSIGNED TO FIELD

IUCR: 0110 - Homicide - First Degree Murder

0552 - Assault - Aggravated Po:Knife/Cut Instr

Occurrence Location: [REDACTED] Beat: 1131

Unit Assigned: 1133R

RO Arrival Date: 30 June 2015 02:33

Domestic Related Incident

Offenders: 1

Occurrence Date: 30 June 2015 02:30

FAMILY MEMBER NOTIFIED

Name: [REDACTED]

Beat: 0731

Res: [REDACTED]

Beat: 5100

Other Communications and Availability

Business @

Email:

Cellular

Phone: [REDACTED]

Personal @

Email:

VICTIM - Individual

Police Officer

Name: PAIGE, Po

3151 W Harrison St Beat: 1134
Chicago, IL

Demographics

Age: Years

Sobriety: Sober

Other Communications and Availability

Residence 312-746-8386

Phone:

VICTIM - Individual

Demographics

Name: [REDACTED]

Female

DOB:

Res: [REDACTED]

Black

Age:

49 Years

Beat: 1131

5'07,

Birth Place: Illinois

Beat: 5100

243 lbs

DLN:

Sobriety: Unknown

Brown Eyes

Brown Hair

Medium Hair Style

Medium Complexion

Identification:

Type

State

Number

State Id

Illinois

NON OFFENDER

NON OFFENDER	PERSON REPORTING OFFENSE - Individual		Demographics
	Name: [REDACTED]	Res: [REDACTED]	
		Beat: 5100	Brown Eyes Black Hair Braids Hair Style Medium Complexion

INJURIES	Injury Info		Victim
	Injured by offender	Injury Extent:	Fatal
Offender Status Date (Homicide): 30-June -2015 03:12 Given?			Removed Date: 30 June 2015
Responding Unit: AMBULANCE 23			
Type		Weapon Used	Other Weapon Used
Asphyxiation		Other	Other - Electrical Chord

SUSPECTS	Suspect #		In Custody
	Name: [REDACTED]	Res: [REDACTED]	Beat: 1131
			Demographics
			Male Black 5'11, 240 lbs Beat: 1131
			DOB: [REDACTED] Age: 49 years Birth Place: IL
			Suspected of Using: Weapon
			Brown Eyes Black Hair Shaved Hair Style Medium Complexion

RELATIONSHIP	RELATIONSHIP		
	(Victim) PAIGE, Po	is a	No Relationship of [REDACTED] (Offender)
(Victim) [REDACTED]	is a	Girlfriend of [REDACTED] (Offender)	

DOMESTIC INFO	Order of Protection Info	
	Order of Protection #: - IL	Reason: Victim Deceased
	Reason: Victim Deceased	

Chicago Police Department - Incident Report

RD #:

NOTIFICATIONS	Request Type	Unit	Agency Name	Date	Star #	Name
	Notification	177	Forensic Services Division	30 June 2015 04:02	13131	,SARLO
	Request Type			Date	Star #	Name
	Notification			30 June 2015 04:08	69	,HINES
	Request Type	Unit	Agency Name	Date	Star #	Name
	Notification	630	Detective Area - North	30 June 2015 03:10	21403	,SPAIN
	Request Type	Unit	Agency Name	Date	Star #	Name
	Notification	116	Deployment Operations Center	30 June 2015 04:24	7303	,CHIBE
	Request Type			Date	Star #	Name
	Notification			30 June 2015 03:55	19618	,ALFARO
	Request Type	Unit	Agency Name	Date	Star #	Name
	On Scene	630	Detective Area - North	30 June 2015 03:23	20598	,HEERDT
	Request Type	Unit	Agency Name	Date	Star #	Name
	On Scene	630	Detective Area - North	30 June 2015 03:23	20592	,REGAL
	Request Type	Unit	Agency Name	Date	Star #	Name
	On Scene	277	Forensic Services Evidence Technician Section	30 June 2015 04:30	17875	,DELIS

NARRATIVE

EVENT # [REDACTED] IN SUMMARY, R/OS RESPONDED TO CALL OF CHECK WELL BEING AT ABOVE LOCATION. ON SCENE OUTSIDE OF ABOVE ADDRESS, R/OS MET BY [REDACTED] (PERSON REPORTING OFFENSE, VICTIM'S SON) WHO RELATED THAT HE FEARED [REDACTED] VICTIM, PERSON REPORTING'S MOTHER) HAD BEEN KILLED BY [REDACTED] (PERSON REPORTING OFFENSE) RELATED THAT HE HAD SEEN A FACEBOOK POST BY OFFENDER ON VICTIM'S PAGE STATING THAT OFFENDER HAD KILLED [REDACTED] (VICTIM). [REDACTED] (PERSON REPORTING OFFENSE) RELATED THAT HE HAD TRIED CALLING VICTIM SEVERAL TIMES ON HER CELL PHONE AND SHE WASN'T ANSWERING. [REDACTED] (PERSON REPORTING OFFENSE) ALSO STATED THAT HE COULD HEAR OFFENDER UPSTAIRS MAKING NOISE AND THROWING THINGS. AT THIS TIME, OFFENDER WAS OBSERVED BY R/OS LEANING OUT THE 3RD FLOOR APARTMENT WINDOW. OFFENDER STATED SEVERAL TIMES THAT OFFICERS SHOULD KILL HIM, HE WAS DEAD ALREADY, AND THAT HE HAD TAKEN POISON THREE TIMES TODAY. WHEN R/OS ASKED OFFENDER WHERE VICTIM WAS, OFFENDER STATED "SHE IS WITH [REDACTED] SHE ISN'T HERE". OFFENDER THEN STATED "IM NOT COMING DOWN. YOU'RE GONNA HAVE TO BREAK IN AND KILL ME". AT THIS TIME, R/OS APPROACHED 3RD FLOOR APARTMENT REAR DOOR, KNOCKED AND ANNOUNCED OFFICE, AND DIRECTED OFFENDER TO OPEN DOOR. OFFENDER REPEATED "YOU'RE GONNA HAVE TO BREAK IN AND KILL ME". REAR DOOR WAS ALREADY BROKEN AND LEANING ON FRAME. 1120R HAWKINS MADE ENTRY FOLLOWED BY PO PAIGE (VICTIM AND COMPLAINANT) AND R/OS. AT THIS TIME, HAWKINS OBSERVED OFFENDER WITH KNIFE IN HAND. R/OS DIRECTED OFFENDER TO DROP THE KNIFE MULTIPLE TIMES. OFFENDER REPEATEDLY STATED "YOU'RE GONNA HAVE TO KILL ME". OFFENDER THEN TURNED TOWARDS PO PAIGE (VICTIM AND COMPLAINANT) AND TOOK AN AGGRESSIVE POSTURE. PO PAIGE (VICTIM AND COMPLAINANT) DEPLOYED TASER TO APPREHEND OFFENDER (EXPENDED TASER PROBE INV [REDACTED] OFFENDER FELL IN APARTMENT BATHROOM WITH KNIFE STILL IN HAND. AT THIS TIME, R/O DISARMED OFFENDER AND DROPPED KNIFE INTO BATH TUB, THEN PROCEEDED TO CONTROLLED HANDCUFFING. AT THIS TIME, 1111R DISCOVERED [REDACTED] (VICTIM, OFFENDER'S GIRLFRIEND) LYING PRONE IN APARTMENT BEDROOM, UNRESPONSIVE. 1111R THEN OBSERVED A COMPUTER CHORD WRAPPED AROUND VICTIM'S NECK. 1111R CALLED FOR EMS. AMB 23 ARRIVED ON SCENE AT 0257. VICTIM PRONOUNCED ON SCENE BY [REDACTED]

[REDACTED] OFFENDER TAKEN INTO CUSTODY AND TRANSPORTED BY 1172R TO [REDACTED] OFFENDER TREATED AND RELEASED BY [REDACTED] OFFENDER THEN TRANSPORTED TO 011 BY 1172R FOR PROCESSING. AREA NORTH DETECTIVES 5364 HEERDT #20598 AND REGAL #20592 ON SCENE AT 0323. AREA NORTH DETECTIVE DESK SPAIN #21403 AT 0310. MEDICAL EXAMINER HINES #69 NOTIFIED AT 0408, CASE [REDACTED]. NEWS AFFAIRS ALFARO #19618 NOTIFIED AT 0355. CRIME LAB SARLO #13131 NOTIFIED AT 0402. DSS ODONNELL #2167 NOTIFIED 0413. CPIC CHIBE #7303 AT 0424. E.T. DELIS #17875 ON SCENE 0430.

NOTIFICATION: SERGEANT HAWKINS Beat#: Star#: 1454 Emp#: Date: 30-JUN-2015 Time: 0233 ONS

NOTIFICATION: DISTRICT DESK ODONNELL Beat#: Star#: 2167 Emp#: Date: 30-JUN-2015 Time: 0413 NOT

- STAR#: 1454 NAME: TIMOTHY HAWKINS BEAT: 1120R
- STAR#: 4308 NAME: ERIC JAMES BEAT: 1106E
- STAR#: 11349 NAME: RICKY PAGE BEAT: 1106E
- STAR#: 8092 NAME: BRIAN CONLISK BEAT: 1111R
- STAR#: 16816 NAME: ANTHONY BLANCO BEAT: 1111R
- STAR#: 5143 NAME: JULIO RUIZ BEAT: 1172R
- STAR#: 12097 NAME: STEPHEN WHITEHEAD BEAT: 1172R

PERSONNEL

	Star No	Emp No	Name	User	Date	Unit	Beat
Approving Supervisor	1454	[REDACTED]	HAWKINS, Timothy, M	[REDACTED]	30 Jun 2015 08:36	011	
Detective/Investigator	20598	[REDACTED]	HEERDT, Edward, W	[REDACTED]	30 Jun 2015 09:09	630	
Reporting Officer	15757	[REDACTED]	MIESZCAK, Daniel, J	[REDACTED]	30 Jun 2015 08:09	011	1133R

TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED <input type="checkbox"/> DNA SUBJECT INFORMATION	1. DATE OF INCIDENT		TIME	2. ADDRESS OF OCCURRENCE				3. LOCATION CODE		4. BEAT/OCCUR					
	30-JUN-2015		02:53:00	[REDACTED]				090		1131					
	5. POSITION	6. LAST NAME		7. FIRST NAME	8. STAR NO.	9. SEX	10. RACE CODE	11. AGE	12. HT.	13. WT.					
	9161	PAGE		RICKY L	11349	<input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	BLK	[REDACTED]	602	195					
	14. DATE OF APPT.	15. EMPLOYEE NO.		16. UNIT & BEAT OF ASSIGNMENT	17. DUTY STATUS	18. MEMBER INJURED?	19. MEMBER IN UNIFORM?								
	15-MAR-2013	[REDACTED]		011 1106E	<input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off	<input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	<input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No								
	20. LAST NAME	21. FIRST NAME		22. M.I.	23. SEX	24. RACE	25. D.O.B.	26. HT.	27. WT.						
	[REDACTED]	[REDACTED]		[REDACTED]	<input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	BLK	[REDACTED]	511	240						
	28. ADDRESS	29. TELEPHONE NO.		30. WAS SUBJECT ARMED? OTHER (SPECIFY), VERBAL THREAT (ASSAULT)	31. SUBJECT INJURED?	32. SUBJECT ALLEGED INJURY?									
	[REDACTED]	[REDACTED]		<input checked="" type="checkbox"/> 01 Yes <input type="checkbox"/> 02 No	<input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	<input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No									
33. WHERE WAS MEDICAL TREATMENT OBTAINED?	34. BY WHOM?		35. CONDITION	36. CHARGES PLACED	37. CB NO.	38. DNA	39. DNA	40. DNA	41. DNA						
720 ILCS 5.0/9-1-A-1, 720 ILCS 5.0/12-2-B-4				[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]						
REASON FOR USE OF FORCE (Check all that apply) <input type="checkbox"/> DNA	38. SUBJECT'S ACTIONS		39. MEMBER'S RESPONSE		40. ADDITIONAL INFORMATION										
	DID NOT FOLLOW VERBAL DIRECTION	<input checked="" type="checkbox"/>	FLED	<input type="checkbox"/>	IMMINENT THREAT OF BATTERY	<input checked="" type="checkbox"/>	ATTACK WITH WEAPON	<input checked="" type="checkbox"/>	USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM	<input type="checkbox"/>					
	STIFFENED (DEAD WEIGHT)	<input type="checkbox"/>	PULLED AWAY	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	ATTACK WITHOUT WEAPON	<input type="checkbox"/>	WEAPON	<input type="checkbox"/>					
	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>					
	MEMBER PRESENCE	<input checked="" type="checkbox"/>	OPEN HAND STRIKE	<input type="checkbox"/>	ELBOW STRIKE	<input type="checkbox"/>	KNEE STRIKE	<input type="checkbox"/>	FIREARM	<input type="checkbox"/>					
	VERBAL COMMANDS	<input checked="" type="checkbox"/>	TAKE DOWN / EMERGENCY HANDCUFFING	<input type="checkbox"/>	CLOSED HAND STRIKE/PUNCH	<input type="checkbox"/>	KICKS	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>					
	ESCORT HOLDS	<input type="checkbox"/>	OC CHEMICAL WEAPON	<input type="checkbox"/>	IMPACT WEAPON (Describe in Box 40)	<input type="checkbox"/>	IMPACT MUNITION (Describe in Box 40)	<input type="checkbox"/>							
	WRISTLOCK	<input type="checkbox"/>	CANINE	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>							
	ARMBAR	<input type="checkbox"/>	TASER (Probe Discharge)	<input checked="" type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>							
	PRESSURE SENSITIVE AREAS	<input type="checkbox"/>	TASER (Contact Stun)	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>							
CONTROL INSTRUMENT	<input type="checkbox"/>	TASER (Spark Displayed)	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>								
OC/CHEMICAL WEAPON W/AUTHORIZATION	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>								
OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>	OTHER _____	<input type="checkbox"/>								
39. DNA	* OC/CHEMICAL WEAPON AUTHORIZED BY (NAME)			40. ADDITIONAL INFORMATION						70. EVENT NO.					
POSITION		STAR NO.	UNIT	41. WEAPON TYPE		42. INCIDENT OCCURRED	43. LIGHTING CONDITIONS	44. WEATHER CONDITIONS	71. R.D. NO.						
<input type="checkbox"/> 01 REVOLVER		<input type="checkbox"/> 04 SEMI-AUTO PISTOL	<input type="checkbox"/> 01 REVOLVER		<input type="checkbox"/> 05 CHEMICAL WEAPON	<input checked="" type="checkbox"/> Indoors <input type="checkbox"/> Outdoors	<input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial	CLEAR							
<input type="checkbox"/> 02 RIFLE		<input checked="" type="checkbox"/> 06 TASER (Probe Discharge)	<input type="checkbox"/> 02 RIFLE		<input type="checkbox"/> 07 OTHER	45. MAKE/MANUFACTURER		46. MODEL	47. BARREL LENGTH	48. CALIBER/GAUGE					
<input type="checkbox"/> 03 SHOTGUN		<input type="checkbox"/> 08 OTHER													
49. TASER DART ID NO. DNA		50. WEAPON SERIAL NO. (Include Letters) X30001H2W			51. CHICAGO GUN REG. NO.		52. IL FIREARM OWNER ID. NO.	53. HANDGUN CERTIFICATE NO.							
54. SPECIAL WEAPON CERTIFICATE NO.		55. PROPERTY INVENTORY NO.			56. TYPE OF AMMUNITION USED		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER.	58. TOTAL NO. OF SHOTS MEMBER FIRED							
<input checked="" type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER		60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO			61. NO. OF CARTRIDGES/ SHOT SHELLS RELOADED		62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 03 OTHER (Specify) <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST)	63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 03 OTHER (Specify) <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW				64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD	65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		
66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC)		67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.									68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBERS WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN	69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)			
72. CASE INFO.		NOTIFICATIONS (OC OR TASER INCIDENT): <input checked="" type="checkbox"/> OEMC <input checked="" type="checkbox"/> DSS & LT./DIST. OF OCCUR.									73. REPORTING MEMBER (Print Name) PAGE, RICKY L		STAR/EMPLOYEE NO.	SIGNATURE	70. EVENT NO.
		NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DSS/DIST. OF OCCUR & OCIC													71. R.D. NO.
		Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.													
SIGNATURES		Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below.													
		74. REVIEWING SUPERVISOR (Print Name) HAWKINS, TIMOTHY M		STAR NO.	SIGNATURE		DATE REVIEWED		TIME	75. DATE OF REPORT					
		1454		[REDACTED]	[REDACTED]		30-JUN-2015		06:23:08	30-JUN-2015					

LIEUTENANT OR ABOVE/OCIC REVIEW

THE ON-CALL INCIDENT COMMANDER (OCIC) WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS INVOLVING THE DISCHARGE OF A FIREARM BY A DEPARTMENT MEMBER; 2.) ALL INCIDENTS INVOLVING THE SERIOUS INJURY OR DEATH OF A MEMBER OF THE PUBLIC SUBSEQUENT TO INTERACTIONS WITH A DEPARTMENT MEMBER; 3.) ALL INCIDENTS INVOLVING THE DISCHARGE OF IMPACT MUNITIONS BY A DEPARTMENT MEMBER; 4.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 THROUGH 3.

THE ASSIGNED INVESTIGATING SUPERVISOR THE RANK OF LIEUTENANT OR ABOVE FROM THE DISTRICT OF OCCURRENCE WILL COMPLETE THE REVIEW SECTION FOR ALL OTHER INCIDENTS.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE DNA REFUSED INTERVIEW NOT CONDUCTED (Specify Reason)

R/Lt. was unable to interview the offender, due to the fact that he refused to answer any questions and requested an attorney.

76. LIEUTENANT OR ABOVE/OCIC RATIONALE FOR BOX 77 FINDING

Based on the review of all the reports and information available at this time, R/Lt. finds the officer's actions were within Department guidelines and consistent with the Use of Force Model.

77. LIEUTENANT OR ABOVE/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO/CRNO. 1075918 OBTAINED

78. LIEUTENANT OR ABOVE/OCIC (Print Name)

HELWINK MASTERS, DANY J

SIGNATURE

DATE COMPLETED

TIME

30-JUN-2015 07:43:18

79. TOTAL TRR's THIS EVENT No.

1

**EVIDENCE SYNC™****TASER Information**

Serial X30001H2W
Model TASER X2
Firmware Version Rev. 04.010
Application Version 3.13.4
Health Good

Offline Report

Local Timezone Central Daylight Time (UTC -05:00)
Generated On 30 Jun 2015 06:27:57

Dates from : Mon Jun 29 21:00:00 2015 to : Tue Jun 30 07:00:00 2015
Device (X2)

Seq #	Local Time [DD:MM:YYYY hh:mm:ss]	Event [Event Type]	Cartridge Info [Bay: length in feet/ status]	Duration [Seconds]	Temp [Degrees Celsius]	Batt Remaining [%]
1274	29 Jun 2015 23:03:22	Armed	C1: 25' Standard C2: 25' Standard		24	73
1275	29 Jun 2015 23:03:23	Arc	C1: 25' Standard C2: 25' Standard	1		73
1276	29 Jun 2015 23:03:24	Safe	C1: 25' Standard C2: 25' Standard	2	24	73
1277	30 Jun 2015 02:51:34	Armed	C1: 25' Standard C2: 25' Standard		26	73
1278	30 Jun 2015 02:51:52	Trigger	C1: Deployed	5		73
1279	30 Jun 2015 02:51:55	Trigger	C2: Deployed	5		73
1280	30 Jun 2015 02:52:03	Arc	C1: Deployed C2: Deployed	1		72
1281	30 Jun 2015 02:52:03	Arc	C1: Deployed C2: Deployed	3		72
1282	30 Jun 2015 02:52:09	Arc	C1: Deployed C2: Deployed	5		72
1283	30 Jun 2015 03:05:34	Safe	C1: Deployed C2: Deployed	840	41	68
1284	30 Jun 2015 06:27:14	USB Connected				
1285	30 Jun 2015 06:25:52	Time Sync	30 Jun 2015 06:27:31 to 30 Jun 2015 06:25:52			

OFFICER'S BATTERY REPORT
CHICAGO POLICE DEPARTMENT

RD NO. [REDACTED]

INSTRUCTIONS: This form is to be completed for all incidents when: (1) a sworn member is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while performing a police function either on-duty or off-duty, (2) a detention aide is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while in the performance of his or her duties.

"X APPLICABLE BOXES"

OFFICER INFORMATION		INCIDENT INFORMATION	
NAME (LAST - FIRST - M.I.) PAGE, RICKY L		<input checked="" type="checkbox"/> 1. INDOOR <input type="checkbox"/> 2. OUTDOOR ADDRESS OF OCCURRENCE [REDACTED]	
STAR NO. 11349	POSITION POLICE OFFICER	CITY <input checked="" type="checkbox"/> CHICAGO	STATE (If outside Chicago)
DATE OF APPOINTMENT 15-MAR-2013	EMPLOYEE NO. [REDACTED]	LOCATION CODE 090-APARTMENT	BEAT OF OCCURRENCE 1131
UNIT OF ASSIGNMENT 011	BEAT/CALL NO. 1106E	DATE OF OCCURRENCE 30-JUN-2015	TIME 02:53:00
SEX <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F	RACE BLACK	DAY OF WEEK TUESDAY	NO. OF OFFICERS BATTERED 1
HEIGHT 602	WEIGHT 195	WERE THERE ASSISTING UNITS ON SCENE? 1. <input checked="" type="checkbox"/> YES 2. <input type="checkbox"/> NO	
TYPE OF ASSIGNMENT WHEN BATTERY OCCURRED		IF YES HOW MANY ASSISTING OFFICERS WERE PRESENT AT TIME BATTERY (EXCLUDING YOU OR YOUR PARTNERS)? 9	
<input checked="" type="checkbox"/> 1. ON DUTY <input type="checkbox"/> A. UNIFORM, PATROL DUTY <input type="checkbox"/> B. UNIFORM, OTHER DUTY Describe _____		WORKING: <input type="checkbox"/> A. ALONE <input checked="" type="checkbox"/> B. WITH ONE PARTNER <input type="checkbox"/> C. WITH MULTIPLE PARTNERS How many? [REDACTED]	
<input checked="" type="checkbox"/> C. CITIZEN'S DRESS <input type="checkbox"/> D. TACTICAL <input type="checkbox"/> E. B.I.S. UNIT <input type="checkbox"/> F. SPECIAL EMPLOYMENT <input type="checkbox"/> G. OTHER _____		PATROL TYPE: <input checked="" type="checkbox"/> A. SQUAD CAR <input type="checkbox"/> B. FOOT <input type="checkbox"/> C. BICYCLE <input type="checkbox"/> D. APV/MOTORCYCLE <input type="checkbox"/> E. SQUADROL <input type="checkbox"/> F. OTHER _____	
<input type="checkbox"/> 2. OFF DUTY <input type="checkbox"/> 3. SPECIAL EMPLOYMENT <input type="checkbox"/> 4. SECONDARY / OTHER		MANNER OF ATTACK <input type="checkbox"/> 01. SHOT <input type="checkbox"/> 02. SHOT AT <input type="checkbox"/> 03. STABBED/CUT (INCLUDING ACTUAL ATTEMPT) <input type="checkbox"/> 04. STRUCK/BLUNT FORCE (INCLUDING ACTUAL ATTEMPT) <input checked="" type="checkbox"/> 05. OTHER (INCLUDING VERBAL THREATS)	
TYPE OF ACTIVITY		TYPE OF WEAPON/THREAT (Check all that apply): <input type="checkbox"/> A. FIREARM CALIBER <input type="checkbox"/> B. VEHICLE <input type="checkbox"/> C. KNIFE/OTHER CUTTING INSTRUMENT <input type="checkbox"/> D. BLUNT INSTRUMENT <input type="checkbox"/> 1. REVOLVER <input type="checkbox"/> 2. SEMI-AUTOMATIC <input type="checkbox"/> 3. RIFLE <input type="checkbox"/> 4. SHOTGUN <input type="checkbox"/> E. FEET <input type="checkbox"/> F. MOUTH (SPIT, BITE, ETC.) <input checked="" type="checkbox"/> G. VERBAL THREAT (ASSAULT) <input checked="" type="checkbox"/> H. OTHER (SPECIFY) _____ /REFUSED TO RELINQUISH WEAPON	
<input type="checkbox"/> A. AMBUSH -NO WARNING <input type="checkbox"/> B. TRAFFIC STOP/PURSUIT <input type="checkbox"/> C. INVESTIGATING SUSPICIOUS PERSON <input type="checkbox"/> D. DISTURBANCE - DOMESTIC <input type="checkbox"/> E. DISTURBANCE - MENTAL PATIENT <input type="checkbox"/> F. DISTURBANCE - RIOT/MOB ACTION/CIVIL DISORDER <input type="checkbox"/> G. DISTURBANCE - OTHER <input type="checkbox"/> H. MAN WITH A GUN <input checked="" type="checkbox"/> I. PURSUING/ARRESTING OFFENDER (Specify) CHARGE 720 ILCS 6.0/9-1-A-1-MURDER - FIRST DEGREE MURDER IUCR CODE HOMICIDE - FIRST DEGREE MURDER		FIREARM USE INFORMATION (Check all that apply): <input type="checkbox"/> A. OFFICER AT GUNPOINT <input type="checkbox"/> B. OFFICER'S OWN WEAPON OBTAINED <input type="checkbox"/> C. ATTEMPTED TO OBTAIN OFFICER'S OWN WEAPON	
<input type="checkbox"/> J. PROCESSING/TRANSPORTING/GUARDING A PRISONER (Specify) ORIGINAL CHARGE _____ ORIGINAL IUCR CODE _____		OFFENDER INFORMATION SEX <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F RACE BLACK DOB [REDACTED]	
<input type="checkbox"/> K. OTHER		CB NO. [REDACTED] IR NO. [REDACTED]	
TYPE OF INJURY TO OFFICER		WAS THE OFFENDER'S ACTIVITY: DRUG RELATED? <input type="checkbox"/> 1. YES <input type="checkbox"/> 2. NO <input checked="" type="checkbox"/> 3. UNKNOWN GANG RELATED? <input type="checkbox"/> 1. YES <input checked="" type="checkbox"/> 2. NO <input type="checkbox"/> 3. UNKNOWN NO. OF OFFENDERS PRESENT? 1	
LIGHTING CONDITIONS AT INCIDENT		WEATHER CONDITIONS <input type="checkbox"/> A. DAYLIGHT <input type="checkbox"/> D. DUSK <input type="checkbox"/> B. NIGHT <input checked="" type="checkbox"/> E. ARTIFICIAL LIGHT <input type="checkbox"/> C. DAWN <input checked="" type="checkbox"/> 1. POOR <input type="checkbox"/> 2. GOOD	
		<input checked="" type="checkbox"/> A. CLEAR <input type="checkbox"/> D. FOG / SMOKE / HAZE <input type="checkbox"/> G. OTHER <input type="checkbox"/> B. RAIN <input type="checkbox"/> E. SLEET / HAIL <input type="checkbox"/> C. SNOW <input type="checkbox"/> F. SEVERE CROSS WIND	
APPROXIMATE OUTDOOR TEMPERATURE: 65°F			

INCIDENT OCCURRED AT THE SCENE OF A HOMICIDE

REPORTING MEMBER - SIGNATURE
PAGE, RICKY L

STAR NO.
11349

WATCH COMMANDER /UNIT COMMANDING OFFICER- SIGNATURE STAR NO.
HELWINK MASTERS, DANY J
261

SUPPLEMENTARY REPORT

CHICAGO POLICE

1. NUMBER OF CONCERNED IDENTIFICATION CARD NUMBER 160111

HOMICIDE: 1ST DEGREE

2. DATE OF INCIDENT AS SHOWN ON LAST PREVIOUS REPORT

3. DATE OF THIS REPORT

4. APPROXIMATE OR APPROXIMATE HOURS SINCE INDICATED OTHERWISE

0110

30 JUN 15

0230

1132

1111R

090

DOB: [REDACTED]

X YES [REDACTED] NO [REDACTED] YES X NO

5. TYPE OF LOCATION OR PREMISE WHERE INCIDENT/OFFENSE OCCURRED

APARTMENT

PROPERTY		DESCRIPTION, PROPERTY IN INVENTORY		1. MONEY		2. JEWELRY		3. FURS		4. CLOTHING		5. OFFICE EQUIPMENT		6. TV, RADIO, STEREO		PROPERTY INVENTORY NO. 1	
		T-TAKEN, R-RECOVERED		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$			
		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R			
7. HOUSEHOLD GOODS		8. CONSUM. GOODS		9. FIREARMS		10. NARC./DANGEROUS DRUGS		11. OTHER		12. N/A		13. N/A		14. N/A		15. N/A	
<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$		<input type="checkbox"/> T \$	
<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R		<input type="checkbox"/> R	
11. OFFENDER'S NAME (OR DESCRIBE CLOTHING, ETC.)		12. HOME ADDRESS		13. SEX-RACE-AGE CODE		14. HEIGHT		15. WEIGHT		16. EYES		17. HAIR		18. COMPL.		19. ARREST UNIT NO.	
DOB: [REDACTED]		[REDACTED] (IN CUSTODY)		M-1-49		510		210		BRN		Wavy		Mod			
14. C.B. NO.		15. I.R. NO. D.O.B. OR J.O.A. NO.		16. OFFENDER REL. CODE		17. C.B. NO.		18. I.R. NO. D.O.B. OR J.O.A. NO.		19. OFFENDER REL. CODE		20. I.R. NO. D.O.B. OR J.O.A. NO.		21. STATE LICENSE NO.		22. STATE	
OFF 1		IR# [REDACTED]		OFF 2													
16. OFF-1 VEHICLE: YEAR, MAKE		BODY STYLE		COLOR		VIN.		17. VEHICLE: YEAR, MAKE		BODY STYLE		COLOR		VIN.		18. VEHICLE: YEAR, MAKE	
17. USED, STOLEN:																	

80. NARRATIVE

RE: [REDACTED] In Summary, R/Os RESPONDED TO THE ABOVE LISTED ADDRESS REGARDING A CHECK THE WELL-BEING CALL. DURING THE COURSE OF THE INCIDENT Documented UNDER BELOW LISTED RD#, R/Os BLANCO #16816, & CONLISK #8092 Discovered ABOVE VICTIM IN THE APARTMENT'S BEDROOM, FACE-DOWN, FULLY CLOTHED IN A BLUE NIGHT GOWN, WITH HER HEAD TOWARDS THE EAST, & HER FEET TOWARDS THE WEST. IN AN ATTEMPT TO RENDER IMMEDIATE MEDICAL AID, R/O BLANCO #16816 RE-POSITIONED THE BEDROOM'S MATTRESS AND CHECKED FOR THE VICTIM'S PULSE. ON SCENE: CFD-EMS #23 ENG 95, MEDICAL EXAMINER HINES #69. CPD BEATS 1110R, 1120R, 1106ER, 1106FR, 1106GR, 1111R, 1113R, 1131R, 1132R, 1133R, 1172R, 5364, 5327, 5370, 5820, AND 5822. R/Os ASSIGNED to CRIME SCENE PROTECTION.

90. EXTRA COPIES REQUIRED (NO. & RECIPIENT)		91. DATE THIS REPORT SUBMITTED - DAY MO YR		TIME		92. SUPERVISOR APPROVING (PRINT NAME)		STAR NO.			
93. REPORTING OFFICER (PRINT NAME)		94. REPORTING OFFICER (PRINT NAME)		STAR NO.		SIGNATURE		STAR NO.			
B. CONLISK 8092		A. BLANCO 16816				Hawkins		1451			
SIGNATURE		SIGNATURE		SIGNATURE		SIGNATURE		SIGNATURE			
S. J. Glik		A. Blanco		A. Blanco		T. Hawkins		T. Hawkins			
CPD-11-11-A (REV. 8-05)		*MUST BE COMPLETED IN ALL CASES		*MUST BE COMPLETED IN ALL CASES		*MUST BE COMPLETED IN ALL CASES		*MUST BE COMPLETED IN ALL CASES			
30 JUN 15		0830		30 JUN 15		0830		30 JUN 15		0830	
TIME		TIME		TIME		TIME		TIME		TIME	